

**BEST AVAILABLE COPY**

<b>CLAIMS ONLY</b>							SERIAL NO.		FILING DATE	
							APPLICANT(S)			
CLAIMS										
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.				IND.
1	J					51				
2						52				
3						53				
4						54				
5						55				
6						56				
7						57				
8						58				
9						59				
10						60				
11						61				
12	J					62				
13						63				
14						64				
15						65				
16						66				
17						67				
18						68				
19						69				
20						70				
21	J					71				
22						72				
23						73				
24						74				
25						75				
26						76				
27						77				
28						78				
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35						85				
36						86				
37						87				
38						88				
39						89				
40						90				
41						91				
42						92				
43						93				
44						94				
45						95				
46						96				
47						97				
48						98				
49						99				
50						100				
TOTAL IND.	2					TOTAL IND.				
TOTAL DEP.	18					TOTAL DEP.				
TOTAL CLAIMS	20					TOTAL CLAIMS				

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS